### FORM D

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UNITED STATES PROCESSED Washington No. 2022

JUL 2 4 2008 X

FORM D

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SEC USE ONLY Prefix Serial DATE RECEIVED

Real Processing THOMSON REUTERS OF SALE OF SECURITIES PURSUANT TO REGULATION D.

JUL 18 2008 **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offeringn, (IC) check if this is an amendment and name has chang Quantum Parallel Partners V, LP	ed, and indicate change.)
11/4/45	Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment	Z Maio 300 - Section (o) - eses
A. BASIC IDENTIFICA	TION DATA
Enter the information requested about the issuer	
Name of Issuer (  check if this is an amendment and name has changed, Quantum Parallel Partners V, LP	s centum naturi seulu naturi seulu nitat seulu
Address of Executive Offices (Number and Street, City, State, 2 777 Walker, Suite 2530, Houston, Texas 77002	Telephone . (713) 225-4800
Address of Principal Business Operations (Number and Street, City, State, 2 (if different from Executive Offices)  Not Applicable	ip Code) Telephone Number (Including Area Code) Not Applicable
Brief Description of Business: Private investment fund	
Type of Business Organization    corporation   limited partnership, already form   limited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization	Month Year 06 2008 ⊠ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal CN for Canada; FN for other	
GENERAL INSTRUCTIONS	

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

DOL 1182840101123/25011 DOC148408 0004

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exemption.	Conversely, failure to file the
appropriate federal notice will not result in a loss of an available state exemption unless such	exemption is predicated on the
filing of a federal notice	SEC 1972 (1/94) 1 of 8

A. BASIC IDENTIFICATION DATA
Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equi securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  General Partner  Managing Partner
Full name (Last name first, if individual)  QEM V, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner  Managing Partner
Full name (Last name first, if individual) S. Wil VanLoh, Jr.
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner  Managing Partner
Full name (Last name first, if individual)  Toby R. Neugebauer
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner  Managing Partner
Full name (Last name first, if individual)  A.V. Jones, Jr.
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner Managing Partner
Full name (Last name first, if individual)  James V. Baird
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner Managing Partner
Full name (Last name first, if individual)  David L. Bole
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner  Managing Partner
Full name (Last name first, if individual)  Campbell, John H. Jr.
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner  Managing Partner
Full name (Last name first, if individual) Smith, Alan L.
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Member of General Partner Managing Partner
Full name (Last name first, if individual) Soler, V. Scott
Business or Residence Address (Number and Street, City, State, Zip Code) 777 Walker, Suite 2530, Houston, Texas 77002
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

				B. IN	FORMAT	ION ABO	UT OFFE	RING				
1. Has the	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes 	No ⊠	
			An	swer also	in Appendi	x, Column	2, if filing	under UL	OE.			
2. What is	s the minir	num inves	ment that	will be acc	epted from	any indiv	idual? sub	ject to wai	ver		\$10,000	0,000
											Yes	No
4. Enter t commi offering and/or	he informassion or s g. If a pe with a sta	ation reque imilar rem rson to be te or state	ested for eauneration listed is a s, list the r	ich person for solicit n associat name of th	who has bation of pued person e broker o	peen or with archasers or agent or dealer.	ll be paid of the connect of a broker of the life in t	or given, di ion with sa or dealer i	rectly or in ales of sec registered v persons to	ndirectly, ar urities in the with the SE be listed as er only.	ny ne C	
Full Name Terenc	(Last nam e M. Crik		ndividual)									
Business o 43 She			(Number wich, CT		City, State	e, Zip Cod	e)					
Name of A Cham		Broker or l sors, LLC										
States in W	hich Perso	on Listed I	Ias Solicite	d or Inten	ds to Solici	it Purchase	rs					
(Check "	All States'	or check	individual	States)			************	************			🔲 A	Il States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first, if i	ndividual)					• · •		, , , , , , , , , , , , , , , , , , ,	•	
Business o	r Residenc	e Address	(Number	and Street,	City, State	e, Zip Code	e)					
Name of A	ssociated	Broker or l	Dealer									·· · · · · · · · · · · · · · · · · · ·
States in W	hich Perso	on Listed I	Ias Solicite	d or Inten	ds to Solici	it Purchase	rs					
(Check "	All States'	or check	individual:	States)							П А	ll States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first, if is	ndividual)									
Business o	r Residenc	e Address	(Number a	and Street,	City, State	, Zip Code	<del>)</del>					
Name of A	ssociated 1	Broker or I	Dealer									
			(Use blank	sheet, or c	opy and us	se addition	al copies o	f this sheet	as necessa	ıry.)		

C. OFFERING PRICE, NUMBER OF INV	ESTORS, EXPENSES	S AND USE OF PR	OCI	EEDS
<ol> <li>Enter the aggregate offering price of securities included in this of amount already sold. Enter "0" if answer is "none" or "zero." If the exchange offering, check this box ☐ and indicate in the columns be the securities offered for exchange and already exchanged.</li> </ol>	he transaction is an			
Type of Security		Aggregate Offering Price		Amount Already Sold
Debt	<u>\$</u>	none	\$_	none
Equity	<u></u> \$	none	\$	none
☐ Common ☐ Preferred				·
Convertible Securities (including warrants)	<u>\$</u>	none	_ \$_	none
Partnership Interests	<u>.</u>	2,750,000,000	\$	50,000,000
Other (Specify:	\$	none	\$	none
Total	<b>s</b>	2,750,000,000	\$	920,350,000
Answer also in Appendix, Column 3, if fil	ing under ULOE.			
securities in this offering and the aggregate dollar amounts of the offerings under Rule 504, indicate the number of persons which securities and the aggregate dollar amount of their purchases on the "0" if answer is "none" or "zero."	no have purchased			Aggregate
		Number Investors	_	Dollar Amount of Purchases
Accredited Investors		52	<u> </u>	50,000,000
Non-accredited Investors	······	0	_ \$	0
Total (for filings under Rule 504 only)			_ <u>\$</u>	
Answer also in Appendix, Column 4, if filing under ULOE.		•		
3. If this filing is for an offering under Rule 504 or 505, enter the the issuer, to date, in offerings of the types indicated, in the twelve (12) n offering. Classify securities by type listed in Part C - Question 1.	information requested for nonths prior to the first sa	le of securities in this		Dallan Amana
Type of offering		Type of Security		Dollar Amount Sold
Rule 505		<del></del>	_ <u>\$</u>	
Regulation A	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_	\$	
Rule 504			<u>\$</u>	
Total			_ <u>\$</u>	
4. a. Furnish a statement of all expenses in connection with the is offering. Exclude amounts relating solely to organization expenses of the subject to future contingencies. If the amount of an expenditure is not kn the left of the estimate.	issuer. The information	may be given as		
Transfer Agent's Fees			\$	
Printing and Engraving Costs			\$	
Legal Fees	***************************************	🛛	\$	200,000
Accounting Fees	***************************************		\$	
Engineering Fees	***************************************		\$	. <u>.</u>
Sales Commissions (specify finders' fees separately)		🛛	\$	*
Other Expenses (identify) misc and filing fee	<u>S</u>	🛛	\$	10,000
Total			\$	210,000

<ul> <li>b. Enter the difference between the aggregate offering price given in Part C –Question 1 and total expenses furnished in response to Part C 4.a. This difference is the "adjusted gross proceeds to the issuer."</li> </ul>	response to  Question			\$ 2,74	9,790,000
5. Indicate below the amount of the adjusted gross proceeds to the is proposed to be used for each of the purposes shown. If the amount purpose is not known, furnish an estimate and check the box to the estimate. The total of the payments listed must equal the adjusted grot to the issuer set forth in response to Part C - Question 4.b above.	ount for any e left of the				
			Payments to Officers, Directors, & Affiliates	P	ayments To Others
Salaries and fees	•••••	<u>\$</u>	*	\$	0.00
Purchase of real estate		<u>\$</u>	0.00	_ 🗆 🕏	0.00
Purchase, rental or leasing and installation of machinery and equipment	***************************************	<u>\$</u>	0.00		0.00
Construction or leasing of plant buildings and facilities		<u> </u>	0.00	🗆 💺	0.00
Acquisition of other businesses (including the value of securities involv	ed in this				•
offering that may be used in exchange for the assets or securities of anothe pursuant to a merger)	r issuer	□ \$	0.00	□ <b>s</b>	0.00
Repayment of indebtedness		\$	0.00	_ <u>  "                                  </u>	0.00
Working capital		□s □s	0,00	- U <del>*</del>	0.00
Other (specify) invest in securities		¢	0.00	- 🗆 <del>=</del>	9,790,000
Column Totals		∏ \$	*		9,790,000
Total Payments Listed (column totals added)			<b>⊠</b> \$ 2,749		211201000
Total Payments Listed (column totals added)			(A) (B) (B) (B) (B)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<del></del>
D. FEDERA	L SIGNAT	URE			
The issuer has duly caused this notice to be signed by the undersign following signature constitutes an undertaking by the issuer to furnish the its staff, the information furnished by the issuer to any non-accredited in	o the U.S. Se	curities a	ind Exchange Comm	iission, upon w	er Rule 505, the vritten request of
Issuer (Print or Type) Quantum Parallel Partners V, LP By: QEM V, LLC, General Partner	Signature	rln	I.ML	Date July/5,	2008
Name of Signer (Print or Type)  Michael P. Dalton	1	igner (Pr	rint or Type)    resident   Authorized Si		· · · · · · · · · · · · · · · · · · ·
	NTION				
Intentional misstatements or omissions of fact constitute for	deral crin	ninal vi	iolations.	(See 1	8 U.S.C. 1001.)

# APPENDIX

1		2	3			4			5 lification	
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
			Interests in Quantum Parallel	Number of Accredited		Number of Non-Accredited				
STATE	Yes	No	Partners V, LP	Investors	Amount	Investors	Amount	Yes	No	
AL					<del></del>					
AK										
AZ					<u> </u>					
AR										
CA										
со										
CT										
DE								_		
DC										
FL										
GA										
НІ							<u> </u>			
ID										
IL										
IN										
IA										
KS										
KY							_			
LA										
ME										
MD										
MA	-									
MI										
MN										
MS					-					
МО					<u>.                                      </u>					

## **APPENDIX**

					LINDIA	····				
1		2	3			4			5	
<u> </u>									lification ate ULOE	
	Intond	to sell	Type of security							
		ccredited	and aggregate offering price		Type of	finvestor and		(if yes, attach explanation of		
		s in State	offered in state			rchased in State			waiver granted)	
	(Part B	-Item 1)	(Part C-Item 1)		(Part	C-Item 2)			E-Item 1)	
			Interests in	Number of		Number of			l	
STATE	Yes	No	Quantum Parallel Partners V, LP	Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
MT	163	]	raithers v, Lr	Investors	Amount	Investors	Amount	1 1 63	140	
NE										
NV										
NH										
NJ				-					-	
NM										
NY										
NC							ļ			
ND										
ОН										
ОК										
OR										
PA				-						
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
wv										
WI										
WY										
PR										

